



<sup>a</sup> Assessment conclusive=clinician conducting the neurodevelopmental assessment is satisfied that the session was a true representation of the person's ability and that any deficits reported were not due to extenuating circumstances. Assessments may be inconclusive for children under six years of age, because some areas of assessment cannot be investigated with confidence until the person is older or because of other confounding factors, such as temporary life stress or illness.

<sup>b</sup> Microcephaly is not the only pathway to diagnosis for infants and young children; these individuals may also receive other FASD diagnoses, as specified elsewhere in the algorithm, if they show three areas of substantial impairment on neurodevelopmental tests.

<sup>c</sup> At risk for neurodevelopmental disorder and FASD, associated with prenatal alcohol exposure. An at-risk designation includes situations where a full neurodevelopmental assessment is not conclusive because of age or situational factors; therefore, FASD may not be the diagnoses. Clinical judgement is recommended.

**Contribution of genetic factors should be considered in all cases and referral may be indicated in a typical cases or where PAE is uncertain.**